

NOTICE OF FILING/CLAIM FEE(S) DUE

TO ENSURE PROPER CREDIT OF FEES, PLEASE RETURN A COPY OF THIS FEE CALCULATION SHEET WITH YOUR RESPONSE.

APPLICATION NUMBER: _	9/030,838
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FORM OPE-RAM-01 (Rev. 5/97)

Total Fee Calculation

		Fee Code	Total # Claims	Number Extra	<u> </u>	F cc	Fee =	<u>Total</u>	
		Sm./Lg				Sm. Entity	Lg. Entity	10(2)	
E	Basic Filing F€	201/101	0.1				90	790	
T	Total Claims >20	203 (103)	$\frac{20}{100} = \frac{20}{100} = \frac{20}{100}$	6	X		130	100	
L	ndependent Claims >3	202/102	<u> </u>		X		574	504	
. N	Ишт. Dep Claim Present	204/104						<u></u>	
S	urcharge	205/105					100	100	
Ε	inglish Translation	139					. ———		
Ţ	OTAL FEE CALCUL	ATION		·				1624	
Fees due upon filing the application:									
Total Filing Fees Due = \$									
Less Filing Fees Submitted - 5									
BALANCE DUE = \$ // OC									
Office of Initial Patent Examination									



Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 1997 **CLAIMS AS FILED - PART I OTHER THAN** SMALL ENTITY **SMALL ENTITY TYPE** OR (Column 1) (Column 2) **FOR NUMBER EXTRA NUMBER FILED** RATE FEE RATE FEE **BASIC FEE** 395.00 790.00 OR **TOTAL CLAIMS** minus 20 = x\$11=x\$22= OR INDEPENDENT CLAIMS minus 3 = x41 =x82= OR MULTIPLE DEPENDENT CLAIM PRESENT +135= +270= OR If the difference in column 1 is less than zero, enter "0" in column 2 **TOTAL** TOTAL OR **CLAIMS AS AMENDED - PART II OTHER THAN SMALL ENTITY** OR (Column 1) (Column 2) (Column 3) **SMALL ENTITY** CLAIMS **HIGHEST** ADDI-ADDI-REMAINING **PRESENT** NUMBER **TIONAL** AMENDMENT **AFTER EXTRA** RATE TIONAL **RATE PREVIOUSLY FEE** FEE AMENDMENT PAID FOR Total Minus x\$22=x\$11=OR = Independent Minus x82= x41 =OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135= +270= TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 3) (Column 1) (Column 2) **CLAIMS HIGHEST** ADDI-ADDI-REMAINING **PRESENT** AMENDMENT B **NUMBER** RATE TIONAL RATE TIONAL **AFTER PREVIOUSLY EXTRA** FEE FEE AMENDMENT PAID FOR Total Minus x\$11=OR x\$22= Independent Minus x82 =x41 =OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM OR +270= +135= TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) **CLAIMS** HIGHEST ADDI-ADDI-REMAINING **PRESENT** NUMBER RATE **TIONAL** RATE **TIONAL AFTER PREVIOUSLY EXTRA AMENDMENT** FEE FEE **AMENDMENT** PAID FOR Total Minus x\$22=x\$11=OR = Independent Minus x82 =x41 =OR = FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM OR +135= +270= * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

OR

TOTAL

ADDIT. FEE

TOTAL

ADDIT. FEE